

# Coordinated School Health Education

November 2001

Every school day, over one million young people attend public schools in Washington state. Given the size and accessibility of this population, our schools can make an enormous, positive impact on the health of our state.

Research studies show that health education in schools effectively reduces health risk behaviors among teens. For example:

- Planned, sequential health education resulted in a 37% reduction in the onset of smoking among 7th graders.
- The prevalence of obesity was decreased by half among girls in grades 6–8 who participated in a school-based intervention program.
- 44% fewer students who were enrolled in a school-based life skills training program used alcohol, tobacco, and marijuana one or more times per month than those not enrolled in the program.

## What's in a good school health program?

Experts in education and public health agree that a coordinated school health program that addresses specific guidelines and includes common components is the best way to respond to the complex health and academic challenges facing our youth.

There are eight components of a coordinated school health program . . .

***“Schools could do more than perhaps any other single institution in society to help young people, and the adults they will become, live healthier, longer, more satisfying and more productive lives.”***

***Carnegie Council  
on Adolescent  
Development***

# 8 Components of a Coordinated School Health Program

- ❶ Health education teaches physical, mental, emotional, and social topics.
- ❷ Physical education supports physical activity and cardiovascular fitness.
- ❸ Health services provide prevention, early intervention, and management of acute chronic health conditions.
- ❹ Nutrition services offer nutritious meals, and an environment that promotes healthy food choices and nutrition education.
- ❺ Counseling, psychological and social services provide assistance and referral.
- ❻ A healthy environment promotes a positive physical, social, and emotional climate.
- ❼ Health promotion activities for school staff helps them maintain their own health and act as healthy role models.
- ❽ Family and community involvement promote partnerships that maximize resources and expertise.

## Key Elements of Exemplary School Health Programs

### Active Leadership

- Key decision makers in school administration support school health.
- A school health council meets regularly and offers guidance. It includes representatives from religious, medical, business, criminal justice, public health and volunteer or nonprofit health organizations, as well as families, administrators, teachers, students and staff.
- A specially trained employee has sufficient resources to coordinate the school health program.
- Priorities are based on the most current community data about health risks for youth, such as the Survey of Adolescent Health Behaviors.

## **A Coordinated and Collaborative Approach**

- The school health council oversees all aspects of health, including health services, school lunches and drug prevention programs.
- Priorities, roles, and tasks are identified and established based on an understanding of community values and the needs of students, families, and staff.
- The council provides a forum for open communication.
- The council refines the school health program based on changing needs and resources.
- The program addresses the needs of all students, families and staff.
- The program links with other health and social service providers and programs in the community.

## **A Safe and Nurturing Environment**

- Policies, programs, and facilities promote clear, high expectations for positive academic achievement and positive health outcomes.
- Facilities are hazard-free and promote learning.
- Health-enhancing messages from a variety of sources are consistent (e.g. nutrition education is reinforced by lunch-room offerings; safety messages are underscored by having seat belts in school buses).

## **A Commitment of Time, Personnel, and Resources**

- Time, personnel, and resources are well managed.
- Students, families, and school employees have access to appropriate resources.
- School staff have adequate time to plan and deliver health instruction and support services, and foster collaborative activities with community partners.
- Time and resources are available to seek funding for efforts that address student and school needs.

### ***In the U.S.:***

***• Every day, nearly 3,000 teens take up daily smoking.***

***• Daily participation in high school physical education classes dropped from 42% in 1991 to 27% in 1997.***

***• Almost 3/4 of young people do not eat the recommended number of servings of fruits and vegetables.***

***• Every year, almost 1 million teens become pregnant and about 3 million become infected with a sexually transmitted disease.***

***U.S. Department of Health and Human Services: Centers for Disease Control and Prevention***

*Adapted from a brochure developed by the  
American Cancer Society*

## **Resources:**

Comprehensive Health Education Foundation:  
[www.chef.org/healthyschools.html](http://www.chef.org/healthyschools.html)

***Building Infrastructure for Coordinated  
School Health: California's Blueprint 2000,***  
[www.cde.ca.gov/cyfsbranch/Lsp/health/](http://www.cde.ca.gov/cyfsbranch/Lsp/health/)

***Improving School Health: A Guide to the Role  
of the School Health Coordinator,*** American  
Cancer Society, 1-800-ACS-2345



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